

PATENT 2 2 2005

Practitioner's Docket No. U 014758-5

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Morris Taylor MURRAY, et al.

Serial No.:

10/663,437

Group No.:

1725

Filed: September 16, 2003

Examiner:

L. Tran

MAGNESIUM PRESSURE CASTING

RESPONSE UNDER 37 C.F.R. 1.116 **EXPEDITED PROCEDURE** EXAMINING GROUP <u>1725</u>

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AMENDMENT OR RESPONSE AFTER FINAL REJECTION-FIRST PAGE

In response to the final action of January 10, 2005 please amend the above

	CERTIFICATION UND	ER 37 C.F.R. 1.8(a) and 1.10*
		press Mail label number is mandatory;
	Express Mail ceri	tification is optional.)
i hereb	y certify that, on the date shown below, this correspo	ndence is being:
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		Signature
Date:	April 22, 2005	William R. Evans
		(type or print name of person certifying)

oversight that can be avoided by the exercise of reasonable care, requests for waiver of this requirement

will not be granted on petition." Notice of Oct. 24, 1996, 60 Fed. Reg. 56,439, at 56,442.

(Amendment or Response after Final Rejection-First Page) 9-20.1

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AMENDMENT OR RESPONSE AFTER FINAL REJECTION-TRANSMITTAL

CERTIFICATION UNDER 37 C.F.R. 1.8(a) and 1.10* (When using Express Mail, the Express Mail label number is mandatory; Express Mail certification is optional.)

I hereby certify that, on the date shown below, this correspondence is being:

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37 C C D 1 0(-)

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	3/ C.P.R. 1.6(a)		37 C.P.R. 1.10					
	with sufficient postage as first class mail.		as "Express Mail Post Offic	press Mail Post Office to Address"				
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	TRAN	SMISSION						
⊠	transmitted by facsimile to the Patent and Trademark Office. to (703) 872-9306							
		Signa	nture					
Date:	April 22, 2005	William R. Evans						
	•	(type	or print name of person certifyi	ing)				

*WARNING:

Each paper or fee filed by "Express Mail" must have the number of the "Express Mail" mailing label placed thereon prior to mailing. 37 C.F.R. 1.10(b).

"Since the fiting of correspondence under § 1.10 without the Express Mail mailing label thereon is an oversight that can be avoided by the exercise of reasonable care, requests for waiver of this requirement will not be granted on petition." Notice of Oct. 24, 1996, 60 Fed. Reg. 56,439, at 56,442.

(Amendment or Response after Final Rejection-First Page) 9-20.1

1.	Trans	smitted herewith is ar	n amendment after final rejection	(37 C.F.R. 1.116) for this application				
NOTE:	of the e the SSI	ory Period (SSP) is set for late of the Office Action, i P to expire on the date of t	r response to a Final Rejection, the res If filed within two months, any Advisory	plications wherein a three month Shortened ponse would best be filed within two months Action mailed after the SSP expires will rese urposes, but never more than six months from 71 to 591).				
			STATUS					
2.		pplication is qualifie	ed as					
		a small entity.						
	⊠	other than a small	entity.					
			EXTENSION OF TERM					
NOTE:	As 10 a O.G. 3	As to a Supplemental Amendment filed in response to a final office action, the Notice of December 10, 1985 (1061 O.G. 34-35) states:						
		filing and/or entry of a of the shortened statut	Notice of Appeal or filing and/or entry lory period unless the timely-filed resp	n, an extension of time is required to permit of an additional amendment after expiration onse placed the application in condition for in the shortened statutory period, the period				
3.		(6	complete (a) or (b), as applicable	le)				
3.	(a) Applicant petitions for an extension of time under 37 C.F.R. 1.13 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for the total number of months che							
		Extension	Fee for other than	Fee for				
	6	(months)	small entity	small entity				
	፟	one month	\$ 120.00 .	\$ 60.00				
		two months	\$ 450.00	\$ 225.00				
		three months	\$ 1,020.00	\$ 510.00				
	_	four months	\$ 1,590.00	\$ 795.00				
		five months	\$ 2,160.00	\$ 1,080.00				
			Fee: \$	120.00				
If addit:	ional ex	tension of time is re-	quired, please consider this a pe	tition therefor.				
		(check a	nd complete the next item, if app	plicable)				
		An extension for is a requested.	months has already been s deducted from the total fee due fo	secured and the fee paid therefor of or the total months of extension now				
		Extension f	ee due with this request \$					
			OR					
	(b)	tional petiti	pelieves that no extension of terrion is being made to provide fo	n is required. However, this condi- r the possibility that applicant has ition and fee for extension of time.				

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	æ	ol.1)		(Col. 2)	(Cal. 2)	CAAAAA COM				THER THA	N A
		laims		(C01. 2)	(Col. 3)	SMALL ENT	TIY	SM	ALL	ENTITY	
		nainir		Highest No.							
		After	. 5	Previously	Present		A 3				
		ndme	ent	Paid For	Extra	Rate	Aa Fe	dit.	0 D		Add
		_		1 2 3 3 3	DAGG	Nate	Г	ee	OR	Rate	Fee
Total		**	Minus	**	=	x \$ 25=	\$			x \$50 =	\$
Indep.		125	Minus	***	=	x \$100=	\$			x \$200=	\$
□ First	Preser	ntatio	n of Multi	ple Dependent	Claim	+ \$180 =	\$			+ \$360 =	\$
_						Total			OR	Total	
						Addit. Fee	\$			Addit. Fee	\$
VARNIN	G:	See .	87 C.F.R. §	1.116.							
				(complete ((c) or (d), (as applicable	.)				
((c)		No ad	ditional fee is:	required.						
					OR						
((d)		Total :	additional fee 1	required is	\$	<u> </u>				
				FE	E PAYM	ENT					
	-	Attac	ched is a c	heck in the sur	m of \$						
Ø	3	Char	ge Accou	nt No. <u>12-0425</u>	the su	m of \$120	<u>.00</u> .				

A duplicate of this transmittal is attached.

FEE DEFICIENCY OR OVERPAYMENT

NOTE: Where there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the case. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, (1065 O.G. 31-33).

6. ☑ If any additional extension and/or fee is required, charge Account No. 12-0425

AND/OR

☑ If any additional fee for claims is required, charge Account No. 12-0425

AND/OR

Refund any overpayment to Account No. 12-0425.

SIGNATURE OF PRACTITIONER

William R. Evans

(type or print name of practitioner)

P.O. Address

c/o Ladas & Parry LLP 26 West 61st Street New York, N.Y. 10023.

Reg. No.: 25,858

Tel. No.: ()

Customer No.:

00140

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